PTO/SB/21 (09-04)

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## TRANSMITTAL **FORM**

10/617,930 Filing Date 07/11/2003 First Named Inventor Brignac **Art Unit** 1743 **Examiner Name** Alexander, Lyle **Attorney Docket Number** 071394-2

(to be used for all correspondence after initial filing) 12

Total Number of Pages in This Submission

ENCLOSURES (Check all that applie)									
ENCLOSURES (Check all that apply)									
X	Fee Transmittal Form	Drawing(s)  After Allowance Communication to TC							
	Fee Attached	Licensing-related Papers  Appeal Communication to Board of Appeals and Interferences							
*	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):							
	Certified Copy of Priority Document(s)	Remarks							
	Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53								
	SIGN	TURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name GMX_TECHNOLOGY_INC.									
Signature RASO. Tours									
Printe	Robert D. Tousl								
Date	July 17, 2005	Reg. No. 34,032							

## **CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name Robert D. Touslee Date July 18, 2005

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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

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TBADEN Effective on Effective on Effective on Consolidated A	Complete if Known								
parodant to the contained	Application Number 10/617.930								
FEE TRA	Filing Date		07/11/2003						
For F	First Named Inv	entor	Brignac						
	Examiner Name Alex		Alexander, Ly	/le					
X Applicant claims small entity	Art Unit 1743		1743						
TOTAL AMOUNT OF PAYMENT	60.00	Attomey Docke	t No.	071394-2					
METHOD OF PAYMENT (check all that apply)									
Check XX Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments									
under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card									
information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARCH,	AND EX	AMINATION FEES							
FI	LING FEI	ES SEAF	RCH FEES	EXA	VINATION FEES	;			
Application Type Fe	141	ee (\$) Fee (\$	Small Entity Fee (\$)	Fee	(\$) Small Entity Fee (\$)	Fees Paid (\$)			
Utility 30		500	250	200	0 100				
Design 20	00 1	100 100	50	130	0 65				
Plant 20	00 1	300	150	160	0 80				
Reissue 30	00 1	500	250	600	0 300	<del></del>			
Provisional 20	00 1	0 0	0	(	0 0				
2. EXCESS CLAIM FEES						Small Entity			
Fee Description	<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25							
Each claim over 20 (included and independent claim of	•				200	100			
Each independent claim of	duding Keissues)			360	180				
Multiple dependent claims  Total Claims  Extr		Dependent Claims							
- 20 or HP =	a Clalms	<u>Fee (\$)                                  </u>	e Paid (\$)		Fee (\$)	Fee Paid (\$)			
HP = highest number of total daim	s paid for, if	greater than 20.			<u> 13.1</u>				
Indep. Claims									
-3 or HP = x =									
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = / 50 = (round <b>up</b> to a whole number) x =									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)									
Other (e.g., late filing surcharge): Fee Code 1251/2251 One Month Extension of Time 60.									
Outer (e.g., face filing suremarge). The dotte feet one flotten excension of fille									
SUBMITTED BY									

SUBMITTED BY
Signature
Registration No. 34,032
Name (Print/Type)
Robert D. Touslee
Registration No. 34,032
Date 07/17/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.